
Application for Trainers of Iowa Evaluator Approval Training Program II: Evaluation of Administrators

January 3, 2006

It is essential that there is an ongoing cadre of training teams for the renewal process for superintendents and other administrators responsible for the evaluation of principals and other administrators.

We are looking for individuals willing to be part of those training teams that will provide evaluators of principals and other administrators with increased knowledge of the Iowa Standards for School Leaders, best practices in evaluation of principals, increased skills in coaching, and formal evaluations of principals.

Our intent is that each training team consists of 1) a district administrator (e.g., practicing, retired) responsible for the evaluation of principals and other administrators and 2) another professional (e.g., AEA, independent) grounded in theory, research, and presentation of content. Each team of two trainers will earn approximately \$2400 (\$1200 each) teaching the 2-credit renewal course with a minimum of 24 participants. Additional trainers and/or compensation will be provided for extremely large classes. (Note: every AEA will have at least one course provided during the 2007-2008 school year.)

The training of trainers will take place on the following dates:

- June 28, 2007
- June 29, 2007
- September 19, 2007
- December 12, 2007
- December 13, 2007

If the selected trainer works for a district/AEA, the district or AEA will cover per diem costs to attend and complete the training of trainers in the Des Moines area. Reimbursement for travel, food, and lodging expenses will be provided. If the selected trainer is not employed by a district/AEA or will be using non-contract time (e.g., personal days/vacation) for this training, a daily stipend of \$300 plus expenses (e.g., travel, food, lodging) will be paid for each day of the training of the trainers.

Trainers who complete this “training of trainers” will receive two credits towards their evaluator approval renewal credit. There will be no fee for the earned credits.

All trainers who are trained in the renewal process will be provided with the opportunity to train at least one cohort. The course begins on September 19, 2007, in the Des Moines area. Module 1 will be provided by Dr. Doug Reeves, and Module 2 will be facilitated by Lou Howell and Carol Lensing on that day. The additional six modules will be facilitated by the selected trainers on the days of the superintendents’ meetings in October, 2007 – May, 2008. The modules will be approximately 2.5 – 3 hours with required assignments and interactive work between modules. All course materials will be provided to each trainer in order to minimize preparation time.

Individuals interested in becoming trainers must complete the attached application and mail/e-mail it to Lou Howell at L1313@mchsi.com or 2555 Pine Circle, Urbandale, IA, no later than February 15, 2007. (Note that the electronic version of this application is available at the SAI (<http://www.sai-iowa.org>) and DE (<http://www.iowa.gov/educate/>) web sites.

Please contact Lou Howell, L1313@mchsi.com or 515.229.4781; or Carol Lensing, carollensing@mchsi.com or 319.832.1926 with any questions.

Iowa Evaluator Approval Training Program II: Evaluation of Administrators Trainer Application

Applicant Name: _____

Home Address: _____

Workplace & Address: _____

Home Telephone: _____

Work Telephone: _____

E-mail Address (one where you can always be reached): _____

Please check any and all of the following that apply:

_____ I will serve as a member of a training team for AEAs as checked below. I recognize that my responsibilities would include the actual training as well as support for the participants in the training. (Please check any and all that apply.)

- _____ AEA 1
- _____ AEA 267
- _____ AEA 8
- _____ AEA 9
- _____ AEA 10
- _____ AEA 11
- _____ AEA Northwest
- _____ AEA 13
- _____ AEA 14
- _____ AEA 15/16

Do you have an interest in being a trainer beyond the 2007-2008 school year?

Yes___ No___

Have you used WebCT?

Yes___ No___

If yes, please describe _____

Are you willing to use/learn to use WebCT to support participants in this training?

Yes___ No___

Training and follow-up for trainers will be held in the Des Moines area on the following dates. Specific details will be provided in March regarding site, times, etc.

- June 28, 2007
- June 29, 2007
- September 19, 2007
- December 12, 2007
- December 13, 2007

Can you commit to being present at all of the above dates?

Yes___No___

If no, which one(s) present a conflict? _____

Please check those that apply:

- _____ I have been a participant of Iowa Evaluator Training Program I.
- _____ I have been a trainer of Iowa Evaluator Approval Training Program I.
- _____ I have been selected as a trainer for the Iowa Evaluator Approval Training Program II: Principals' Renewal
- _____ I have evaluated teachers using the Iowa Teaching Standards and Criteria.
- _____ I have evaluated principals.
- _____ I have evaluated principals using the Iowa Standards for School Leaders.
- _____ I am/have been a trainer/professional developer (e.g., IEATP I, IEATP II – Principal Renewal, literacy, math, collaboration, co-teaching).
- _____ Other: _____

Please check any of the following skills that you presently have:

- _____ Knowledge, skills, and experience in adult learning.
- _____ Skills and experience in dealing with difficult/demanding people.
- _____ Skill in use of instructional technology (e.g., WebCT, PowerPoint).
- _____ Expertise in coaching techniques (e.g., questioning, listening, giving feedback, problem solving) to promote reflection and metacognition and extend participants' learning.
- _____ Understanding and application of the change process.
- _____ Knowledge in information and resources regarding evaluation of administrators.
- _____ Experience and leadership in managerial functions (e.g., planning, communication, set up, accessing and providing materials, follow-up) to assure quality professional development opportunities.
- _____ Expertise in consulting (e.g., development of relationships, clarification of expectations, negotiation of specific work, diagnosis of situations, selection and use of appropriate data, guidance in determination of solution).
- _____ Expertise in facilitating tasks (e.g., organizing, listening, planning, anticipating, observing, making decisions, intervening appropriately).

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- _____ Catalyst for change (e.g., initiating alternatives to current practices, bringing individuals and groups new perspectives, ideas, and suggestions for consideration, constantly upgrading own understanding of the information and resources).
 - _____ High credibility with peers and others with whom you work.

List your strengths as a trainer.

List below your work experience that is applicable to knowledge about and use of the Iowa Teaching Standards and the Iowa Standards for School Leaders. Be sure to list experience as an administrator, including roles as an evaluator of teachers and/or administrators.

What reading/study/presentations have you completed in the area of educator evaluation? What impact have those had on your practice?

How would you address a participant who is not meeting performance expectations in a Level II evaluator training class?

Given the limited resources allocated for this training, will your current employer allow you to be trained as a trainer on contract time? If Yes, your travel, food, and lodging expenses will be covered by the Iowa Department of Education.

Yes___No___

Are you currently not employed or will be using non-contract time (e.g., personal days/vacation) for this training? If Yes, your travel, food, and lodging expenses will be covered by the Iowa Department of Education; a daily stipend of \$300 will be paid for each day of training.

Yes___No___

Two references that may be contacted about the applicant's knowledge and skills in evaluation and presentation include the following. Be sure to list name, position, telephone number, and e-mail address.

Reference 1: Name: _____
 Position: _____
 Phone: _____
 E-mail: _____

Reference 2: Name: _____
 Position: _____
 Phone: _____
 E-mail: _____

The design of the training of trainers will allow you to complete two credits of your own Level II renewal training at no cost. You will not only learn how to present the training, but will experience the training as a participant.

If selected as a trainer, I will honor the time and training commitment required of this project and am able to attend all training or trainer dates as scheduled (except as noted).

Signature

Date

If the applicant is selected, I grant permission for the applicant's release for the required number of days to be a trainer, including being trained and conducting the training. (If applicable)

Board President/ Superintendent's Signature

Date

Timelines

Please complete and return this application by **February 15, 2007**, to:

Lou Howell
2555 Pine Circle
Urbandale, IA 50322
L1313@mchsi.com

Selection of trainers will be determined by March 30, 2007.